

SCHEDULE A-P **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

JEB 2016, INC.

A. Full Name (Last, First, Middle Initial)

MS. SHERRILL HUDSON

Mailing Address **745 SAN ESTEBAN AVE**

City	State	Zip Code
CORAL GABLES	FL	33146-1215

FEC ID number of contributing federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

Transaction ID : SA17.152018

Date of Receipt

09 / 28 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

2700.00

B. Full Name (Last, First, Middle Initial)

CARLOS HUERTA

Mailing Address **106 CAMILO AVE**

City	State	Zip Code
CORAL GABLES	FL	33134-7229

FEC ID number of contributing federal political committee.

C

Name of Employer
MERRILL LYNCH

Occupation
SALES

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Transaction ID : SA17.149679

Date of Receipt

09 / 21 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)

MRS. JACQUELINE T. HUFF

Mailing Address **995 8TH AVE**

FL 6

City	State	Zip Code
NEW YORK	NY	10019-1825

FEC ID number of contributing federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

Transaction ID : SA17.127108

Date of Receipt

07 / 21 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

2700.00

Subtotal Of Receipts This Page (optional).....

5650.00

Total This Period (last page this line number only).....